





DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration 2098 Gaither Road Rockville MD 20850

REGISTERED MAIL- RETURN RECEIPT REQUESTED

WARNING LETTER

Dr. Roshan Maini President Vascutek Limited Newmains Avenue Renfrewshire PA4 9RR Inchinnan, Scotland

Dear Dr. Maini:

During an inspection of your manufacturing facility located in Inchinnan, Scotland, on December 16, through December 19, 1996, our investigator observed conditions which are serious violations of the Federal Food, Drug, and Cosmetic Act (the Act) and deviations from implementing regulations as follows:

The devices manufactured by your firm are or may become adulterated in accordance with Section 501(h) of the Act because the methods used in, and the facilities and controls used for the manufacture, packaging, storage, and installation of devices are not in conformity with the Good Manufacturing Practice (GMP) for Medical Device Regulations as prescribed by Title 21, Code of Federal Regulations Part 820, as follows:

- 1. Failure to establish and implement specification control measures to assure that the design basis for the device is correctly translated into approved specifications, as required by 21 CFR 820.100(a)(1). For example:
 - a) Vascutek has not conducted and/or completed validation studies of all manufacturing processes requiring validation, including sealing (Wet) process for vascular grafts, and the knitting process involving the knitting machine.

have not completed the validations of the knitting machine and the wet process. The whole graft porosity test alone is not considered to be a sufficient check for the wet process. Also, your



response states on page 1 that the validations will be completed in the 3rd and 4th quarters, which conflicts with the statement at the top of page 2 that all validations will be completed by the 1st quarter in 1997.

- 2. Failure to assure that specification changes shall be subject to controls as stringent as those applied to the original device, and failure to specification changes approved and documented by a designated individual, as required by 21 CFR 820.100(a)(2). For example:
 - a) The review of specification decodes, entitled Goods Inwards
 Specification for GELSEAL chemicals and other controlled products,
 revealed that the test method used to perform the Gelatin Degradation
 Test was changed to implement an accelerated test procedure. This
 new procedure was never formally approved, and did not go through
 the Change Approval System, Specification #####.

- b) The accelerated test method used for the degradation of Gelatin, was implemented based on an experiment. This method has not been formally verified and approved, by the proper individuals, to assure that the test will be as effective as the previous one.
 - Your response is considered incomplete, in that the formal "validation" (or verification) will not be completed until February 28, 1997. A copy of the summary report and raw results of this verification testing is required before a decision regarding the adequacy of your response can be made.
- 3 Failure of the formally designate unit to determine whether or not an investigation of a written or oral complaint is necessary, and failure to maintain a record, when no investigation of a complaint is made, that includes the reason and the name of the individual responsible for the decision not to investigate, as require by 21 CFR 820.198(a). For example:
 - a) During the investigation of complaint #266, the firm became aware of at least four additional complaints, related to blood leaking or oozing through the grafts. However, no complaints files were opened for them, and the incidents were not include in the firm's statistical



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analysis of complaints.

Your response states that the physician made one complaint and that a follow-up visit by a QA manager with the physician resulted in the identification of the came problems with previous grafts. This constitutes an oral complaint, and it is the responsibility of the firm to investigate all records of oral and written complaints. The corrective actions taken by your firm covering this incident and the deficiency cited in (b) below appear to be adequate.

b) Your firm's complaint procedure is inadequate in that the procedure does not define or provide clear criteria for identifying a incident that constitutes a oral or written complaint. This resulted in no complaint being opened for information centained in complaint #266.

Your response appears to be adequate and will be verified upon our next inspection of your facility.

4. Failure of the quality assurance program to provide solutions for quality assurance problems and verify the implementation of such solutions, as required by 21 CFR 820.20(a)(3). For example, a review of complaint #247 revealed that the firm failed to follow their Product Recall and Advisory Notices Specification ** in that, a meeting was not held to determine how mislabeled grafts should be handled. It was decided by someone to have the distributors re-label the products and not verify that it had been accomplished. As a result, one of these mislabeled grafts was shipped to a hospital and could not be used (see complaint #294).

Your corrective action appears to be adequate, and will be verified upon our next inspection of your facility.

5. Failure to have the device master record prepared, dated, and signed by a designated individual(s) as required by 21 CFR 820.181. For example, Vascutek did not have formally approved device master records for the products they manufacture.

Your response appears adequate, and will be verified upon our next inspection of your facility.

6. Failure to control environmental conditions, such as temperature, humidity, and lighting, where such conditions could have an adverse effect on the device's fitness for use, as required by 21 CFR 820.46. For



example, Procedure # entitled Spore Strips- Goods Inwards
Specification, calls for the spore strips to be stored in accordance
with the manufacturer's instructions and protected from direct sunlight.
It was observed that several boxes of spore strips were being stored in a
refrigerator and the cadre could not assure that the required temperature
and Relative Humidity were being met. The refrigerator was off at the
time.

Your response appears to be adequate, and will be verified upon our next inspection of your facility.

The above identification of violations is not intended to be an all-inclusive list of the deficiencies at your facility. It is your responsibility to ensure that all products manufactured, distributed, held, and labeled by your firm are in compliance with the provisions of the Act.

Please be aware that Federal agencies a padvised of the issuance of all warning letters about devices so that they may take this information into account when considering the award of contracts. Additionally, no pending applications for premarket approval (PMA's) and no premarket notifications (section 510(k)'s) will be found to be substantially equivalent for products manufactured at the facility in which the above GMP violations were found until the violations have been corrected.

Please netify this office as soon as have addressed the remaining deficiencies and have completed the corrective actions promised in your response letter, dated December 23, 1996. Please include any and all documentation to show that adequate correction has been achieved. In the case of future corrections, an estimated date of completion, and documentation showing plans for correction, should be included with your response to this letter. If the documentation is not in English, please provide an English translation to facilitate our review. Please address your response and any questions to:

Mr. Gregory W. O'Connell U.S. Food and Drug Administration CDRH, Office of Compliance (HFZ-341) Rockville, Maryland 20850

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Should you require any assistance in understanding the contents of this letter, do not hesitate to contact Mr. O'Connell at the above address or at (301) 594-4648 or FAX (301) 594-4672.

Sincerely yours,

Lillian J. Gill Acting Director

Office of Compliance Center for Devices and

Glady Rodriguez fr.

Radiological Health

Drafted by Greg O'Connell (2/11/97)

Concurrence:

DSerra PWS Zliz 97

Revised per Comments: GOR: 2/18/97

cc:

HFA-224

HFC-135

HFC-230

HFC-240

HFI-35

(purged copy of original signed letter)

HFZ-300

DOEIII

Board file

DOEIII

Chron. file

CVNDBranch

Firm file

Wayne Miller

Greg O'Connell

HFR-SW140 (SAN-DO) Importer Distributor: Sulzer-Vascutek

JR 2118197

1300 East Anderson Lane

Austin, Texas

HFR-NE252

Home district (Domenic Veneziano)

CFN: 9612515

Last Date of Inspection: 12/12/94 through 12/14/94

Date DO or ORA Signed Off: 1/14/97

Date ITOB Signed Off: 1/16/97

OC Receipt Date: 1/16/97

Compliance Status: Warning Letter

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